



LUNG-MAP

A lung cancer precision medicine trial

Lung-MAP 3.0 Is Coming, with a Myriad of NGS Options

You spoke, we listened.

A growing number of sites have identified the requirement to use one specific next-generation sequencing (NGS) assay as a barrier to enrolling patients to Lung-MAP.

So we're revising the LUNGMAP screening protocol.

Soon, you'll be able to use results from any of a broad range of NGS assays – from both commercial and academic labs – to genomically screen your patients for assignment to a Lung-MAP sub-study.

We're also developing a process for rapid review of new

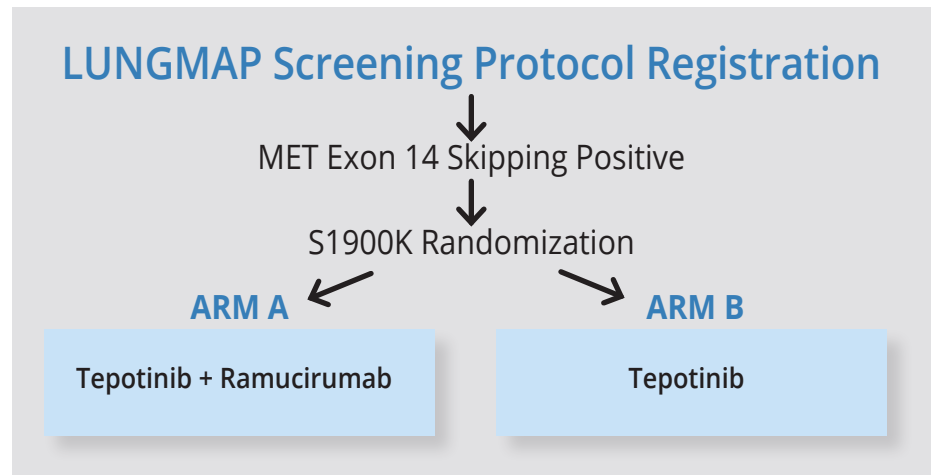
assays, so that you'll be able to get an answer in real time about whether your patient's results from assay X can be used to assign them to a Lung-MAP sub-study.

You'll hear much more about Lung-MAP 3.0 as the revised protocol approaches activation!

S1900K Is Live!

S1900K opened in December, and more than 130 sites have since been approved to enroll to the sub-study (with 300+ other sites now in the approval process).

It's enrolling patients **whose tumors have a MET exon 14-skipping gene change** and who have not previously been treated with a MET inhibitor. Patients are randomized to the MET inhibitor tepotinib with or without the VEGFR2 inhibitor



ramucirumab.

Patients must be registered through LUNGMAP, but their MET exon 14-skipping status can be documented by your

local CLIA-certified lab, using either tissue or blood.

When presenting to patients, use our patient-friendly summary at swog.org/S1900K.

LEARN MORE AT WWW.LUNG-MAP.ORG





Lung-MAP is an umbrella trial for patients with advanced NSCLC with rare alterations. It works best when sites offer *Lung-MAP's full suite of biomarker sub-studies* to these patients!

- **S1900E:** for patients with a KRAS^{G12C} gene mutation:
 - Cohort 1 (co-mutation with TP53) is now full and closed to accrual
 - Cohort 2 (co-mutation with STK11) is OPEN
 - Cohort 3 (all other co-mutations, or no co-mutation) is OPEN
- **S1900G:** for patients with an EGFR mutation who have MET amplification at progression
- **S1900K:** for patients with a MET exon 14-skipping gene change
- **S1900J:** *Coming soon!*
- **S1800E**, our next non-match sub-study, is in development. Until it launches, consider **S2302 Pragmatica-Lung** (phase 3 follow-on to Lung-MAP S1800A) for your Lung-MAP patients who don't match a current biomarker sub-study.

S1900J: On the Cusp of Activation

With activation expected soon, S1900J will enroll **patients with MET amplification** in stage IV or recurrent non-small cell lung cancer (NSCLC). Patients must not have other actionable oncogenic alterations and must not have been treated previously with a MET tyrosine kinase inhibitor.

Participants will be stratified into squamous cell and non-squamous cell cohorts, and all will be treated with a bispecific antibody that targets both EGFR and MET, with a primary

endpoint of objective response rate. The enrollment goal for the study is 88 participants.

The sub-study is chaired by Dr. Christian Rolfo and co-chaired by Dr. Shirish Gadgeel,

with biostatistical leadership by Dr. Mary Redman and Katherine Minichiello, MS.

Watch your inbox and CTSU.org for an S1900J activation announcement!

Clinical trial summary (S1900J)

Targeted Treatment for Advanced Non-Small Cell Lung Cancer that has Extra Copies of the MET Gene

What is the purpose of this clinical trial?

This study tests treatment for non-small cell lung cancer (NSCLC) that has extra copies of the MET gene. Having too many copies of the MET gene is called MET amplification. It can cause cancer to grow and spread faster. Targeting the MET gene is one approach doctors use to fight this type of rare lung cancer. This study



Dr. Christian Rolfo



Dr. Shirish Gadgeel



Dr. Mary Redman



Katherine Minichiello, MS

Lung-MAP Site Coordinators Committee: Applications Invited

The Lung-MAP Site Coordinators Committee (SCC) is seeking four new members!

SCC members are study site staff at the nursing, CRA, data management, and regulatory levels. They come from a variety of institutions, NCTN and NCORP affiliations, and geographical locations. SCC members work closely with Lung-MAP study leaders, providing guidance on accrual strategies, patient and promotional materials, changes to study procedures, data collection processes, and staff training materials.

They're key contributors in keeping Lung-MAP practical, collaborative, and successful.

SCC members attend quarterly conference calls and two SWOG group meetings per year (SWOG provides funds to support group meeting travel).

If this sounds like a role for you, visit

www.surveymonkey.com/r/M8GVDLX

to learn more and apply.

Questions? Contact LungmapSCC@crab.org.



Sub-Study Webinar, May 29

Get your questions about S1900G, S1900K, and S1900J answered at a cross-study educational webinar on



Wednesday, May 29th, 4-5 pm ET / 1-2 pm PT.
[Registration is required.](#)

The webinar will review the eligibility requirements for these sub-studies and provide study-specific updates. Register now, and bring your questions!




New Lung-MAP Patient-Friendly Summary

A new plain-language overview is available to help you introduce the Lung-MAP trial to patients. You can find it, with a printable PDF they can take home, at swog.org/Lung-MAP.

Patient-friendly summaries are available for *all* Lung-MAP sub-studies. Soon, all will also be available in Spanish!

Clinical trial summary (Lung-MAP)

Targeted Treatment for People with Advanced Non-Small Cell Lung Cancer 

What is the purpose of this clinical trial?

Lung-MAP is a large research study about lung cancer. The study is made up of many different clinical trials that test new treatments for advanced non-small cell lung cancer (NSCLC). Each clinical trial in Lung-MAP is called a **sub-study**.

Lung-MAP is for people who have NSCLC that has spread to other parts of the body or has returned after treatment.

Many Lung-MAP sub-studies test a type of treatment called **targeted treatment**. These drugs "target" certain gene changes that can cause cancer to grow. The first step in joining Lung-MAP is to have your tumor tested for certain gene changes that are being studied for targeted treatment.

This trial is set up to find out:


- If there are targeted treatments in Lung-MAP that match the gene changes in your tumor
- If targeted treatments can slow or stop NSCLC from growing

Why is this trial important?

TOP-ACCRUING SITES TO LUNGMAP*

UPMC Hillman Cancer Center	Pittsburgh, PA	154
Edwards Comprehensive Cancer Center	Huntington, WV	72
UNM Comprehensive Cancer Center	Albuquerque, NM	71
Wilmot Cancer Institute Univ of Rochester	Rochester, NY	59
Missouri Baptist Medical Center	St. Louis, MO	50
Cleveland Clinic Mercy Medical Center	Canton, OH	49
Palo Alto Medical Foundation – Sunnyvale	Sunnyvale, CA	42
VA Connecticut Healthcare System – West Haven	West Haven, CT	39
Dartmouth Hitchcock Med Ctr/Dartmouth Cancer Ctr	Lebanon, NH	37
Baystate Medical Center	Springfield, MA	37
UC Davis Comprehensive Cancer Center	Davis, CA	37
Harold Alfond Center for Cancer Care	Augusta, ME	36
AnMed Health Cancer Center	Anderson, SC	34
Univ of Oklahoma Health Sciences Center	Oklahoma City, OK	33

* As of May 16, 2024



**AS OF MAY 16, 2024,
THE LUNGMAP SCREENING
PROTOCOL HAS LOGGED**

3,367
screening registrations

1,720
sub-study assignments

480
sub-study registrations

CONTACT US

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